

Docket No. 50875-F-PCT-US1648 \$  
IPWIN THE UNITED STATES PATENT AND TRADEMARK OFFICEApplicant(s): Graham P. Allaway, et al.Serial No. : 09/460,216 Examiner: Jeffrey S. ParkinFiled : December 13, 1999 Group Art Unit: 1648For : METHODS FOR PREVENTING HIV-1 INFECTION OF CD4+ CELLSMail Stop Amendment  
COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450Date: August 2, 2006

Sir:

Transmitted herewith is an amendment to the above-identified application.

  x   Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been previously established.

       A verified statement to establish small entity status under 37 C.F.R. §1.9 and §1.27 is enclosed.

       No additional fee is required.

The filing fee is calculated as follows:

	Number after Amendment	Highest Number Previously Paid For <sup>1</sup>	Number of Extra Claims Presented	RATE			FEE	
				Small Entity	Other Entity		Small Entity	Other Entity
Total Claims	1 -	* 20 =	*** 0 X	\$25	\$50	=	0	
Independent Claims	1 -	** 3 =	*** 0 X	\$100	\$200	=	0	
Multiple Dependent Claim(s) Presented For First Time <u>      </u> Yes <u>  x  </u> No				\$180	\$360	=	0	
				TOTAL ADDITIONAL FEE			\$ 0	

<sup>1</sup> The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment or the number of claims originally filed.

\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

\*\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

\*\*\* If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0".

Amendment Transmittal Letter  
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The following are also enclosed:

  X   One additional copy of this Amendment Transmittal Letter

  X   Return Receipt Postcard

  X   An Information Disclosure Statement, including Form PTO-1449  
(Copies of citations included: Yes   X   No           
and a fee of \$  180.00  included)

  x   A Petition for an Extension of Time, including a fee of  
\$  510.00  for a Petition for   3   Month(s) Extension of Time

Other (identify):

THE TOTAL FEE DUE IS \$ 690.00

  X   A check in the amount of \$ 690.00 is enclosed.

       Please charge Deposit Account No.            in the amount of  
\$           .

  X   The Commissioner is hereby authorized to charge any additional fees  
required or credit any overpayment to Deposit Account No. 03-3125  
as follows:

  X   Fees under 37 C.F.R. §1.16 for the presentation of extra claims  
Patent application processing fees under 37 C.F.R. §1.17

Respectfully submitted,

John White

John P. White  
Registration No. 28,678  
Attorney for Applicant(s)  
Cooper & Dunham LLP (Customer #23432)  
1185 Avenue of the Americas  
New York, New York 10036  
(212) 278-0400

I hereby certify that this correspondence is being deposited this date with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to:

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450.

John P. White  
Reg. No. 28,678

Date \_\_\_\_\_